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MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURTDepartment of the Treasury
Federal Law Enforcement Agencies
PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA		COURT CASE NUMBER 08 C 237	
DEFENDANT FUNDS IN THE AMOUNT OF \$140,430.22 SEIZED FROM SMITH BARNEY ACCOUNT xxx-xxxxx-x-3-121, et. al.		TYPE OF PROCESS VERIFIED COMPLAINT FOR FORFEITURE/NOTICE OF FORFEITURE	
SERVE AT	Name Of Individual, Company, Corporation, Etc. to Serve or Description of Property to Seize FUNDS IN THE AMOUNT OF \$101,999.78 SEIZED FROM SMITH BARNEY ACCOUNT xxx-xxxxx-x-3-121. c/o		
	Address (Street or RFD / Apt. # / City, State, and Zip Code) IRS, 230 SOUTH DEARBORN, ROOM 1420, CHICAGO, ILLINOIS 60604		
Send NOTICE OF SERVICE copy to Requester: PATRICK J. FITZGERALD, UNITED STATES ATTORNEY OFFICE OF THE UNITED STATES ATTORNEY 219 SOUTH DEARBORN STREET, 5TH FLOOR, CHICAGO, ILLINOIS 60604 ATTN: BARBARA ROBERTSON		Number Of Process To Be Served In This Case.	
		Number Of Parties To Be Served In This Case.	
		Check Box If Service Is On USA	
SPECIAL INSTRUCTIONS or OTHER INFORMATION TO ASSIST IN EXPEDITING SERVICE (includes Business and Alternate Addresses, Phone Numbers, and Estimated Availability Times.) PERSONAL SERVICE IS REQUIRED.			
Signature of Attorney or other Originator requesting service on Defendant MARSHA MCCLELLAN, AUSA		[X] Plaintiff [] Defendant	Telephone No. (312) 353-5300
SIGNATURE OF PERSON ACCEPTING PROCESS:			Date 1/16/08
SPACE BELOW FOR USE OF TREASURY LAW ENFORCEMENT AGENCY			
I acknowledge receipt for the Total # of Process Indicated.	District of Origin No. _____	District to Serve No. _____	SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER: <i>Bunda Viti</i> JAN 29 2008
I hereby Certify and Return That I [] PERSONALLY SERVED, [] HAVE LEGAL EVIDENCE OF SERVICE, [] HAVE EXECUTED AS SHOWN IN "REMARKS", the Process Described on the Individual, Company, Corporation, Etc., At The Address Shown Above or at the Address Inserted Below.			
[] I HEREBY CERTIFY AND RETURN THAT I AM UNABLE TO LOCATE THE INDIVIDUAL, COMPANY, CORPORATION, ETC. NAMED ABOVE.			
NAME & TITLE of Individual Served if not shown above:		[] A Person of suitable age and discretion then residing in the defendant's usual place of abode.	
ADDRESS: (Complete only if different than shown above.)	Date of Service JAN 29 2008	Time of Service [] AM [] PM	
	Signature, Title and Treasury Agency <i>Bunda Viti</i> AFC-IR		
REMARKS:			

TD F 90-22.48 (6/96)

Make (5) copies after form is signed. SEND ORIGINAL + 4 COPIES to TREASURY AGENCY. Retain Copy #5 for your file.